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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Keysa First name  K. Middle name  Henson-Rhodes  Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7931	

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Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live		If Debtor 2 lives at a different address:
		245 Riverside Drive Dolton, IL 60419  Number, Street, City, State & ZIP Code  Cook County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Part 2:

The chapter of the

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Case number (if known)

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Keysa K. Henson-Rhodes Debtor 1

Doc 1

Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. ☐ No. bankruptcy within the Yes. **ILNBKE Chapter 7** 8/25/12 12-33770 District **Dismissed 12/27/12** When Case number District When Case number When District Case number

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

Do you rent your

residence?

Have you filed for

last 8 years?

■ No

☐ Yes.

No.

☐ Yes.

Debtor

District

Debtor Relationship to you When Case number, if known District Go to line 12. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

When

Relationship to you

Case number, if known

bankruptcy petition.

Debtor 1 Keysa K. Henson-Rhodes Document Page 4 of 60 Case number (if known)

Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

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Debtor 1 Keysa K. Henson-Rhodes

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

<b>About Debtor 2</b>	(Spouse Only	in a Joint Case):
-----------------------	--------------	-------------------

You must check one:

Case number (if known)

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

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Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Part	6: Answer These Questi	ons for Re	porting Purposes				
16.	What kind of debts do you have?			nsumer debts? Consumer debts are defining family, or household purpose."	ned in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
				siness debts? Business debts are debts tement or through the operation of the business.			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you ov	ve that are not consumer debts or busines:	s debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7	7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and			o you estimate that after any exempt proper ilable to distribute to unsecured creditors?	erty is excluded and administrative expenses		
	administrative expenses are paid that funds will		■ No				
	be available for distribution to unsecured creditors?		□ Yes				
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000	☐ 25,001-50,000		
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	☐ 50,001-100,000		
		□ 100-19 □ 200-99		☐ 10,001-25,000	☐ More than100,000		
19.	How much do you estimate your assets to be worth?	■ \$0 - \$50,000 □ \$50,001 - \$100,000 □ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion		
				□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you	<b>\$0 - \$5</b>	0,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		1 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			01 - \$500,000 01 - \$1 million	□ \$100,000,001 - \$100 million	☐ More than \$50 billion		
Part	7: Sign Below						
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
				I am aware that I may proceed, if eligible, lief available under each chapter, and I ch			
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
I understand making a false statement, concealing property, or obtaining money or property by fraud in connection bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, and 3571.							
		Keysa K	A K. Henson-Rhodes  Henson-Rhodes  of Debtor 1	Signature of Debtor	2		
Executed on March 29, 2017 MM / DD / YYYY				Executed on MM	/ DD / YYYY		

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Debtor 1 Keysa K. Henson-Rhodes

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David M. Siegel	Date	March 29, 2017
Signature of Attorney for Debtor	_	MM / DD / YYYY
David M. Siegel		
Printed name		
David M. Siegel & Associates		
Firm name		
790 Chaddick Drive		
Wheeling, IL 60090		
Number, Street, City, State & ZIP Code		
Contact phone <b>(847) 520-8100</b>	Email address	
#06207611		
Bar number & State		

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Fill in this information to identify your case:								
Debtor 1	Keysa K. Henson	-Rhodes						
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS					
Case number								
(if known)					Check if this is an			
					amended filing			

## Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your as Value of	sets what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	14,650.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	14,650.00
Par	t 2: Summarize Your Liabilities		
		Your lia Amount	<b>bilities</b> you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	6,200.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	43,674.00
	Your total liabilities	\$	49,874.00
Par	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,797.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,104.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	edules.
<b>,</b>	■ Yes What kind of debt do you have?		
7.	What Kind of debt do you have?  Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Keysa K. Henson-Rhodes Document Page 9 of 60 Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

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9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	11,692.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	11,692.00

-0.0	this inform		Document	Page 10 of 60	17 00:20:01 20	3/29/17 8:23A	
		mation to identify your					
Debto	r 1	Keysa K. Hensor	n-Rhodes  Middle Name	Last Name			
Debto	r 2						
Spouse	e, if filing)	First Name	Middle Name	Last Name			
Inited	States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS			
Case	number					☐ Check if this is an	
				<u> </u>		amended filing	
		rm 106A/B					
Sch	nedul	e A/B: Prop	erty			12/15	
forma	tion. If mor every ques	e space is needed, attach stion.	ate as possible. If two married peop a separate sheet to this form. On t g, Land, or Other Real Estate You C	he top of any additional page			
Do y	ou own or I	have any legal or equitabl	e interest in any residence, building	g, land, or similar property?			
	o. Go to Par	t 2.					
ПΥ	es. Where i	s the property?					
Part 2:	Describe	Your Vehicles					
□ N ■ Y	-						
3.1	_	Chrysler	Who has an interest in t	Who has an interest in the property? Check one		aims or exemptions. Put ed claims on Schedule D:	
		Seabring 2010	Debtor 1 only		Creditors Who Have Clair		
	Approximat		☐ Debtor 2 only☐ Debtor 1 and Debtor 2	only	Current value of the entire property?	Current value of the portion you own?	
	Other inforr		At least one of the deb				
			Check if this is comme (see instructions)	nunity property	\$3,300.00	\$3,300.00	
3.2	Make:	Jeep	Who has an interest in t	he property? Check one	Do not deduct secured cl		
0.2	_	Patriot	Debtor 1 only	ine proporty: Officer office	the amount of any secure Creditors Who Have Clai		
	_	2013	Debtor 2 only		Current value of the	Current value of the	
	Approximat	te mileage:	Debtor 1 and Debtor 2	? only	entire property?	portion you own?	
	Other inforr		At least one of the deb	otors and another			
ſ		'est			\$10,400.00		
	Bridgecr Secured	Lien \$5000	Check if this is comr	nunity property	4.0,.00.00	\$10,400.	

Official Form 106A/B Schedule A/B: Property page 1

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5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$13,700.00 pages you have attached for Part 2. Write that number here.......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No ■ Yes. Describe..... **Household Goods & Furniture** \$300.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$250.00 TV & Electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$400.00 Normal Clothing Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information.....

Schedule A/B: Property

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Case number (if known) Document Keysa K. Henson-Rhodes

Debtor 1

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$950.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... **Chase Bank** \$0.00 17.1. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

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Debtor	1 Keysa K. Henson-Rh	nodes	Boodinent	Case number (if known)	
25. <b>Tru</b> ■ N		ests in prope	rty (other than anythin	g listed in line 1), and rights or powers exe	rcisable for your benefit
ΠY	es. Give specific information a	about them			
Ex ■ N	ents, copyrights, trademarks amples: Internet domain name to es. Give specific information a	s, websites, p	•		
27. <b>Lic</b> Ex ■ N	enses, franchises, and other amples: Building permits, exclu	general intalusive licenses		n holdings, liquor licenses, professional licens	es
Money	or property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
■ N		bout them, inc	cluding whether you alrea	ady filed the returns and the tax years	
Ex ■ N	•	,	usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
Ex ■ N	benefits; unpaid loans	lity insurance   s you made to		efits, sick pay, vacation pay, workers' compe	nsation, Social Security
	•	fe insurance; h	nealth savings account (I	HSA); credit, homeowner's, or renter's insural	nce
ΠY	es. Name the insurance comp Con	any of each pontant pany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
If y	meone has died.			d surance policy, or are currently entitled to rec	eive property because
	es. Give specific information				
Ex ■ N	amples: Accidents, employment	nt disputes, in		t or made a demand for payment to sue	
34. <b>O</b> th	•	ted claims of	every nature, including	g counterclaims of the debtor and rights to	set off claims

 $\hfill \square$  Yes. Describe each claim.......

 $\square$  Yes. Give specific information..

■ No

35. Any financial assets you did not already list

Page 14 of 60 Case number (if known) 3/29/17 8:23AM Document Debtor 1 Keysa K. Henson-Rhodes Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$0.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 ..... \$0.00 Part 2: Total vehicles, line 5 \$13,700.00 57. Part 3: Total personal and household items, line 15 \$950.00 Part 4: Total financial assets, line 36 \$0.00 Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00

Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$14,650.00 Copy personal property total \$14,650.00

63. Total of all property on Schedule A/B. Add line 55 + line 62 \$14,650.00

		Docume	ni Page 15 orb	<u></u>	
Fill in this inform	mation to identify your	case:			
Debtor 1	Keysa K. Henson	-Rhodes			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(II KIOWII)					<ul><li>Check if this is an amended filing</li></ul>

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2010 Chrysler Seabring Line from Schedule A/B: 3.1	\$3,300.00		\$2,400.00	735 ILCS 5/12-1001(c)
Elle Holl Goreage A.B. G.1			100% of fair market value, up to any applicable statutory limit	
2013 Jeep Patriot Bridgecrest	\$10,400.00		\$3,450.00	735 ILCS 5/12-1001(b)
Secured Lien \$5000 Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
Household Goods & Furniture Line from Schedule A/B: 6.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
Line Hotti Schedule Arb. V.1			100% of fair market value, up to any applicable statutory limit	
TV & Electronics	\$250.00		\$250.00	735 ILCS 5/12-1001(b)
Line Holl Schedule A.B. 1.1			100% of fair market value, up to any applicable statutory limit	
Normal Clothing	\$400.00		\$400.00	735 ILCS 5/12-1001(a)
Line from Scriedule A/D. 11.1			100% of fair market value, up to any applicable statutory limit	

Desc Main Case 17-09824 Doc 1 Filed 03/29/17 Entered 03/29/17 08:25:51 Document Page 16 of 60 Keysa K. Henson-Rhodes Case number (if known) Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Checking: Chase Bank** 735 ILCS 5/12-1001(b) \$0.00 \$0.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

Document Page 17 of 60 Fill in this information to identify your case: Debtor 1 Keysa K. Henson-Rhodes Middle Name First Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column A Column B Column C 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured much as possible, list the claims in alphabetical order according to the creditor's name. Do not deduct the that supports this portion value of collateral. claim If any **Bridgecrest Crest** 2.1 \$5,000.00 \$10,400.00 \$0.00 Company, LLC Describe the property that secures the claim: Creditor's Nam 2013 Jeep Patriot **Bridgecrest** Secured Lien \$5000 As of the date you file, the claim is: Check all that 7300 E Hampton Ave Mesa, AZ 85209 ☐ Contingent Number, Street, City, State & Zip Code ■ Unliquidated □ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured ■ Debtor 1 only car loan) Debtor 2 only Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit ☐ Check if this claim relates to a **Purchase Money Security** Other (including a right to offset) community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: \$1,200.00 \$3,300.00 \$0.00 2.2 | TitleMax of Illinois, Inc. Creditor's Name 2010 Chrysler Seabring As of the date you file, the claim is: Check all that 14450 S. LaGrange Road apply. Orland Park, IL 60462 ☐ Contingent Number, Street, City, State & Zip Code ■ Unliquidated □ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured ■ Debtor 1 only car loan) Debtor 2 only Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit ☐ Check if this claim relates to a **Non-Purchase Money Security** Other (including a right to offset) community debt

Official Form 106D

Date debt was incurred 4/16

Last 4 digits of account number

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Debtor 1	Keysa K. Her	nson-Rhodes		Case number (if know)	
•	First Name	Middle Name	Last Name		

Add the dollar value of your entries in Column A on this page. Write that number here: \$6,200.00 If this is the last page of your form, add the dollar value totals from all pages. \$6,200.00 Write that number here:

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Case 17-09824		led 03/29/17 Document	Entered 03/29/17 08:25:5 Page 19 of 60	1 Des	sc Main	3/29/17 8:23AN
Fill in thi	is information to identify you		AACHIII <del>C</del> III	F 60C 19 01 00			
Debtor 1	Keysa K. Henso	n-Rhodes					
	First Name	Middle Na	ame	Last Name			
Debtor 2 (Spouse if, f	First Name	Middle Na	ame	Last Name			
United St	tates Bankruptcy Court for the:	NORTHERN	I DISTRICT OF ILI	LINOIS			
Case nur	mber						
(if known)			_			heck if this	is an
					а	mended filir	ng
<b>∩</b> #:∘:∘!	L Corres 400E/E						
	Form 106E/F	Alla a I I avea	l lua a a coma al	Claim a		4.	1/4 E
	ule E/F: Creditors \			Claims Y claims and Part 2 for creditors with NONPR			2/15
eft. Attach		age. If you have n	o information to re	needed, copy the Part you need, fill it out, nu port in a Part, do not file that Part. On the top			
1. Do an	y creditors have priority unsecu	red claims agains	st you?				
■ No	o. Go to Part 2.						
☐ Ye	es.						
Part 2:	List All of Your NONPRIOR	ITY Unsecured	Claims				
3. Do an	y creditors have nonpriority uns	ecured claims ag	ainst you?				
□ No	o. You have nothing to report in this	part. Submit this f	orm to the court with	your other schedules.			
■ Ye	es.						
unsec	sured claim, list the creditor separate one creditor holds a particular claim	ely for each claim.	For each claim listed	e creditor who holds each claim. If a creditor I I, identify what type of claim it is. Do not list claim have more than three nonpriority unsecured claim	s already inc	luded in Part	1. If more
						Total clain	n
	Aarons Sales & Leasing lonpriority Creditor's Name		Last 4 digits of acc	ount number			\$0.00
4	1428 W. North Ave Chicago, IL 60639		When was the debt	incurred?		-	
	lumber Street City State Zlp Code		As of the date you	file, the claim is: Check all that apply			
v	Vho incurred the debt? Check one	е.					
	Debtor 1 only		☐ Contingent				
	Debtor 2 only		☐ Unliquidated				
	Debtor 1 and Debtor 2 only		☐ Disputed				
	$\operatorname{\beth}$ At least one of the debtors and a	nother		RITY unsecured claim:			
	Check if this claim is for a cor	mmunity	☐ Student loans				
	lebt s the claim subject to offset?		☐ Obligations arising report as priority claim	ng out of a separation agreement or divorce that ms	you did not		
	■ No		Debts to pension	or profit-sharing plans, and other similar debts			
	☐Yes		Other. Specify	NOTICE ONLY			

Document

Page 20 of 60 Case number (if know)

Debto	Keysa K. Henson-Rhodes	Case number (if know)	
4.2	AFNI	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name PO Box 3667	When was the debt incurred?	
	Bloomington, IL 61702  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify NOTICE ONLY	
4.3	ARMCO LLC	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name dba Aaron's Sales & Leasing 4062 Northpoint Blvd.	When was the debt incurred?	
	Waukegan, IL 60085  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. One on an that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify NOTICE ONLY	
4.4	Bud's Ambulance Services  Nonpriority Creditor's Name	Last 4 digits of account number 2064	\$725.00
	P.O. Box 659 Dolton, IL 60419	When was the debt incurred? Opened 11/13	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Collections	

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Case number (if know)

Debtor	1 Keysa K. Henson-Rhodes		Case number (if know)	
4.5	Cnac/mi105	Last 4 digits of account number	2880	\$10,267.00
	Nonpriority Creditor's Name  3227 S Westnedge Ave Kalamazoo, MI 49008	When was the debt incurred?	Opened 09/14 Last Active 4/01/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plans, and other similar debts	
	Yes	Other. Specify Auto Defici	• •	
		— опы. орошу	-	
4.6	Commonwealth Edison Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00
	Bankruptcy Department 2100 Swift Drive	When was the debt incurred?		
	Oak Brook, IL 60523-1559  Number Street City State Zlp Code	- As of the data you file the claim	Charle all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim	<b>s.</b> Спеск ан тлаг арргу	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify NOTICE ON	ILY	
4.7	Contract Callers Inc.	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name 501 Greene Street 3rd Floor Suite 302	When was the debt incurred?		
	Augusta, GA 30901	_		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify NOTICE ON	ILY	

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Case number (if know)

Debt	or 1 Keysa K. Henson-Rhodes	Case number (if know)	
4.8	Convergent Outsourcing  Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	800 Sw 39th St Renton, WA 98057	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify NOTICE ONLY	
4.9	Dependon Collection Service	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name		Ψ0.00
	Attn: Bankruptcy PO Box 4983	When was the debt incurred?	
	Oak Brook, IL 60522-4833		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify NOTICE ONLY	
4.1			
0	Emer Care Phys Serv - Blue Island	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name  Attn: Bankruptcy	When was the debt incurred?	
	12935 Gregory Street		
	Blue Island, IL 60406		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	☐ Yes	■ Other, Specify NOTICE ONLY	

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First Premier Bank	Last 4 digits of account number 3346	\$533.00
Nonpriority Creditor's Name Bankruptcy Department PO Box 5523 Sioux Falls, SD 57117	Opened 06/14 Last Active When was the debt incurred? 9/14/14	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_	П	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
■ Yes	Other. Specify Purchases	
Illinois Tollway Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
Attn:Attorney General Legal Dept. 2700 Ogden Ave.	When was the debt incurred?	
Downers Grove, IL 60515  Number Street City State Zlp Code	As of the data you file the plain in Observal that are in	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify NOTICE ONLY	
Ingalls Memorial Hospital	Last 4 digits of account number 3932	\$1,345.00
Nonpriority Creditor's Name  Bankruptcy Department	When was the debt incurred?	
PO Box 75608 Chicago, IL 60675 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Collections	

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4.1 4	Ingalls Memorial Hospital	Last 4 digits of account number 9059	\$1,345.00
	Nonpriority Creditor's Name Bankruptcy Department PO Box 75608	When was the debt incurred?	
	Chicago, IL 60675		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	•	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	☐ Yes	Other. Specify Collections	
4.1 5	MCSI	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name P.O. Box 327 Palos Heights, IL 60463	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify NOTICE ONLY	
4.1	Metrosouth Medical Center	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name Patient Financial Services Dept. 12935 S. Gregory Street	When was the debt incurred?	
	Blue Island, IL 60406  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	io the elain subject to offset:	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

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4.1 Municollofam \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 3348 Ridge Road When was the debt incurred? Lansing, IL 60438-3112 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify NOTICE ONLY ☐ Yes 4.1 **Nationwide Credit & Collection** \$0.00 Last 4 digits of account number 8 Nonpriority Creditor's Name When was the debt incurred? 815 Commerce Drive Suite 270 Oak Brook, IL 60523-8852 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify NOTICE ONLY ☐ Yes 4.1 **NCO Financial Systems** \$0.00 Last 4 digits of account number 9 Nonpriority Creditor's Name 507 Pudential Road When was the debt incurred? Horsham, PA 19044 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify NOTICE ONLY ☐ Yes

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Norpcorty Creditors Name   ALL MAIL GOES TO   Bankruptcy Dept. PO Box 190   Aurora, IL 60507-0190   Number Street Cry State 2p Code   Who incurred the debt? Check one.   Debtor 1 only   Debtor 2 only   Debtor 3 and Debtor 2 only   Debtor 4 and Debtor 2 only   Debtor 1 only   Debtor 4 and Debtor 2 only   Debtor 4 only   Debtor 5 only   Debtor 6 only   Debtor 7 only   Debtor 8 only   Debtor 9 on	4.2	Nicor Gas	Last 4 digits of account number	\$4,869.00
Bankruptcy Dept. PO Box 190 Aurora, It. 60507-0190 Number Street City Stanz Zip Code Who incurred the debt? Chock one.  Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 4 spronty claims Street City Stanz Zip Code Non-priority Creditor's Name Debtor 3 only Debtor 4 spronty claims Street City Stanz Zip Code Who incurred the debtor and another Debtor 2 only Debtor 4 spronty claims Debtor 4 only Debtor 5 spronty Cestinor's Name Debtor 5 and Debtor 2 only Debtor 5 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor			When was the debt incurred?	
Number Street City State Zip Code Who Incurred the debt? Check one.    Debtor 1 only				
Debtor 1 only			As of the data way file the plains in O. J. H. H. J.	
Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 2 only   Debtor 3 and Debtor 3 only   Debtor 1 and Debtor 3 only   Debtor 4 and Debtor 3 only   Debtor 1 only   Debtor 1 only   Debtor 1 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 3 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 3 only   Debtor 1 and Debtor 3 only   Debtor 1 and Debtor 3 only   Debtor 4 only   Debtor 5 only   Debtor			As of the date you file, the claim is: Check all that apply	
Debtor 1 and Debtor 2 only   Disputed   Di		_	Пол	
Debtor 1 and Debtor 2 only   Type of NONPRIORITY unsecured claim:   Student bans   Student ban			3	
At least one of the debtors and another   Check if this claim is for a community debt   Student loans   Check if this claim is for a community debt   Student loans   Check if this claim is for a community debt   Student loans   Check if this claim is for a community debt   Student loans   Check if this claim is for a community debt   Check if this claim is check   Check if this claim is the claim subject to offset?   Check if this claim is check   Check if this claim is the c			_	
Check if this claim is for a community debt   Check in the claim subject to offset?   Contingent   Chicago, It. 60680   Number Street City State Zip Code   Who incurred the debt? Check one.   PLS   Contingent   Chicago, It. 60680   Number Street City State Zip Code   Who incurred the debt? Check one.   Chicago, It. 60680   Number Street City State Zip Code   Who incurred the debt? Check one.   Chicago, It. 60680   Contingent   C		<u> </u>	•	
Cortex bearing to debt   Is the claim subject to offset?   Cortingent		_		
Is the claim subject to offset?    Payday Loan		•		
No				
Payday Loan		■ No	<u> </u>	
Payday Loan		□ Yes	■ Other. Specify Services	
Payday Loan	4.2			****
1551 Plainfield   Joliet, IL 60435   Number Street (City State Zip Code   Who incurred the debt? Check one.	1		Last 4 digits of account number	\$11,000.00
Number Street City State Zip Code Who incurred the debt? Check one.    Debtor 1 only		1551 Plainfield	When was the debt incurred?	
Who incurred the debt? Check one.    Debtor 1 only			As of the date you file, the claim is: Check all that apply	
Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Is the claim subject to offset?  Check if this claim subject to offset? Check if this claim subject to offset? Check if this claim subject to offset? Check if this claim subject to offset? Check if this claim subject to offset? Check if this claim subject to offset? Check if this claim subject to offset? Check if this claim subject to offset? Chicago, IL 60680 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt check on community claims Check if this claim is for a community claims Check if this claim is for a community claims Check if this claim is for a community claims Check if this claim is for a community claims Check if this claim is for a community claims Check if this claim is for a community claims Check if this claim is for a community claims Check if this claim is for a community claims Check if this claim is for a community claims Check if this claim is for a community claims Check if this claim is for a community claims Check if this claim is for a community claims Check if this claim is for a community claims Check if this claim is for a community claims Check if this claim is for a community Check if this claim is for			As of the date you me, the damnis. Oneok an that apply	
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At least one of the debtors and another   Check if this claim is for a community debt   Student loans   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Other. Specify   Loan      PLS			_ ·	
Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim subject to offset?   Community claims   Check all that apply   Community claims   Communi			•	
debt   S the claim subject to offset?		_		
Is the claim subject to offset?  No Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Loan    A22				
PLS Nonpriority Creditor's Name 9920 South Western Ave. Chicago, IL 60680 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Other. Specify Loan  \$500.00  \$\$500.00  \$\$\$\$ When was the debt incurred? As of the date you file, the claim is: Check all that apply  Who incurred the debt? Check one.  Contingent Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts				
PLS Nonpriority Creditor's Name 9920 South Western Ave. Chicago, IL 60680 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No  Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Dobigations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
As of the date you file, the claim is: Check all that apply    As of the date you file, the claim is: Check all that apply    As of the date you file, the claim is: Check all that apply    As of the date you file, the claim is: Check all that apply    As of the date you file, the claim is: Check all that apply    As of the date you file, the claim is: Check all that apply    As of the date you file, the claim is: Check all that apply    Contingent		☐ Yes	Other. Specify Loan	
As of the date you file, the claim is: Check all that apply    As of the date you file, the claim is: Check all that apply    As of the date you file, the claim is: Check all that apply    As of the date you file, the claim is: Check all that apply    As of the date you file, the claim is: Check all that apply    As of the date you file, the claim is: Check all that apply    As of the date you file, the claim is: Check all that apply    Contingent	42			
9920 South Western Ave. Chicago, IL 60680  Number Street City State Zlp Code Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Contingent □ Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts			Last 4 digits of account number	\$500.00
Number Street City State ZIp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtors and another At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Contingent  Unliquidated  Disputed  Type of NONPRIORITY unsecured claim: Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts		9920 South Western Ave.	When was the debt incurred?	
Who incurred the debt? Check one.  □ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt ls the claim subject to offset? □ Debts to pension or profit-sharing plans, and other similar debts			As of the date you file, the claim is: Check all that apply	
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Disputed □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		,	,	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		Debtor 1 only	☐ Contingent	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		Debtor 2 only	-	
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		☐ Debtor 1 and Debtor 2 only	·	
□ Check if this claim is for a community debt  Is the claim subject to offset?  □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  □ No  □ Debts to pension or profit-sharing plans, and other similar debts		<u> </u>	·	
debt  Is the claim subject to offset?  ■ No  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  □ Debts to pension or profit-sharing plans, and other similar debts			☐ Student loans	
■ No □ Debts to pension or profit-sharing plans, and other similar debts		debt		
			☐ Debts to pension or profit-sharing plans, and other similar debts	
			Other. Specify Loan	

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4.2 **Residential Credit Solutions** \$0.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 4282 N. Freeway When was the debt incurred? Fort Worth, TX 76137 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify NOTICE ONLY 4.2 Sage Telecom \$0.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 79051 When was the debt incurred? Phoenix, AZ 85062-9051 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify NOTICE ONLY ☐ Yes 4.2 Speedy Cash 2272 \$498.00 Last 4 digits of account number Nonpriority Creditor's Name **Bankruptcy Department** When was the debt incurred? Opened 09/15 PO Box 780408 Wichita, KS 67278-0408 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections ☐ Yes

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4.2	Sprint	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name PO Box 4191	When was the debt incurred?	
	Carol Stream, IL 60197-4191		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify NOTICE ONLY	
4.2	Thorton Township High School	Last 4 digits of account number	\$900.00
7	Nonpriority Creditor's Name		4000.00
	15001 Broadway Ave Harvey, IL 60426	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Services	
4.2	Us Dept Of Ed/glelsi	Last 4 digits of account number 8581	\$11,692.00
8	Nonpriority Creditor's Name	Last 4 digits of account number 8581	Ψ11,032.00
	Po Box 7860	Opened 10/13 Last Active	
	Madison, WI 53707	When was the debt incurred? 9/30/16	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
		Student Lean	

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4.2 9	Village Of S Chicago Heights R	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department 3317 Chicago Road	When was the debt incurred?	_
	South Chicago Heights, IL 60411		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify NOTICE ONLY	_
Part	3: List Others to Be Notified About a De	ebt That You Already Listed	
is t	rying to collect from you for a debt you owe to se	about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For exam omeone else, list the original creditor in Parts 1 or 2, then list the collection agend to you listed in Parts 1 or 2, list the additional creditors here. If you do not have acor submit this page.	by here. Similarly, if you
	e and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	Astra Recovery Serv D W 33rd St N Ste 118	Line 4.25 of (Check one):	
	hita, KS 67205	■ Part 2: Creditors with Nonpriority Unsecured	J Claims
	,	Last 4 digits of account number	
Name	e and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	old Scott Harris	Line 4.12 of (Check one):	aims
	W. Jackson, #600	■ Part 2: Creditors with Nonpriority Unsecured	d Claims
Chic	cago, IL 60604	Last 4 digits of account number	
Name	e and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	nmonwealth Edison	Line <b>4.6</b> of ( <i>Check one</i> ):	aims
	kruptcy Department	■ Part 2: Creditors with Nonpriority Unsecured	
-	ncoln Center		
Оак	Brook Terrace, IL 60181-4204	Last 4 digits of account number	
Nome	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	e and Address nmonwealth Edison	Line <b>4.6</b> of ( <i>Check one</i> ):	aims
	Box 6111	■ Part 2: Creditors with Nonpriority Unsecured	
Card	ol Stream, IL 60197-6111	·	1 Olaii 13
		Last 4 digits of account number	
	e and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	t Premier Bank O N. Louise Ave.	Line 4.11 of (Check one):	
	ux Falls, SD 57107	Part 2: Creditors with Nonpriority Unsecured	I Claims
	,	Last 4 digits of account number	
Name	e and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	ois Collection Se	Line <u>4.4</u> of ( <i>Check one</i> ): ☐ Part 1: Creditors with Priority Unsecured Cla	aims
	1 185th St Ste 100	■ Part 2: Creditors with Nonpriority Unsecured	d Claims
lini	ey Park, IL 60487	Last 4 digits of account number	
		•	
	e and Address Allis Memorial Hospital	On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.13 of (Check one):	nime
	respondence Address	Part 1: Creditors with Priority Unsecured Cia	
PO I	Box 3397	- Part 2. Creditors with Nonpriority Unsecured	ı Oldiilis
Chic	cago, IL 60654-0397	Last 4 digits of account number	
		Last 4 digits of account number	

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Medicalrecov 2250 E Devon Des Plaines, IL 60018    Des Plaines, IL 60018   Des	Debtor 1 Keysa K. Henson-Rhodes		Case number (if know)				
Medicalrecov 2250 E Devon   Part 1: Creditors with Priority Unsecured Claims   Part 2: Creditors with Nonpriority Unsecured Claims	Name and Address	On which entry in Port 1 or Port	2 did you list the existent and the 2				
2250 E Devon Des Plaines, IL 60018  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.12 of (Check one):  □ Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  □ Part 2: Creditors with Priority Unsecured Claims  □ Part 2: Creditors with Nonpriority Unsecured Claims  □ Part 2: Creditors with Priority Unsecured Claims  □ Part 2: Creditors with Priority Unsecured Claims  □ Part 2: Creditors with Priority Unsecured Claims  □ Part 2: Creditors with Nonpriority Unsecured Claims  □ Part 2: Creditors with Nonpriority Unsecured Claims  □ Part 2: Creditors with Nonpriority Unsecured Claims  □ Part 2: Creditors with Priority Unsecured Claims  □ Part 1: Creditors with Priority Unsecured Claims  □ Part 2: Creditors with Priority Unsecured Claims		•	,				
Name and Address NCO Financial Systems, Inc. 600 Holiday Plaza Drive Suite 300 Matteson, IL 60443  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Name and Address NCO Financial Systems, Inc. Bankruptcy Department PO Box 15630 Wilmington, DE 19850  Name and Address Sprint Corp. Attn: Bankruptcy Dept. PO Box 7949 Overland Park, KS 66207-0949  Last 4 digits of account number  Last 4 digits of account number  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.19 of (Check one):  □ Part 1: Creditors with Nonpriority Unsecured Claims  □ Part 2: Creditors with Nonpriority Unsecured Claims  □ Part 2: Creditors with Priority Unsecured Claims  □ Part 2: Creditors with Nonpriority Unsecured Claims  □ Part 2: Creditors with Priority Unsecured Claims  □ Part 2: Creditors with Nonpriority Unsecured Claims  □ Part 2: Creditors with Nonpriority Unsecured Claims  □ Part 2: Creditors with Nonpriority Unsecured Claims		or (errors erro).					
Name and Address NCO Financial Systems, Inc. 600 Holiday Plaza Drive Suite 300 Matteson, IL 60443  Name and Address NCO Financial Systems, Inc. 600 Holiday Plaza Drive Suite 300 Matteson, IL 60443  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.19 of (Check one):  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Name and Address NCO Financial Systems, Inc. Bankruptcy Department PO Box 15630 Wilmington, DE 19850  Name and Address Sprint Corp. Attn: Bankruptcy Dept. PO Box 7949 Overland Park, KS 66207-0949  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.26 of (Check one):  Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one):  Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims	Des Plaines, IL 60018	Last 4 digits of account number	· a.t · o.toa.loto marrior.promy orlocourou oranico				
NCO Financial Systems, Inc. 600 Holiday Plaza Drive Suite 300 Matteson, IL 60443  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Name and Address NCO Financial Systems, Inc. Bankruptcy Department PO Box 15630 Wilmington, DE 19850  Name and Address Sprint Corp. Attn: Bankruptcy Dept. PO Box 7949 Overland Park, KS 66207-0949  Name and Address  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor? Part 2: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims  Attn: Bankruptcy Dept. PO Box 7949 Overland Park, KS 66207-0949  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor? Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims		Last 4 digits of account number					
Part 2: Creditors with Nonpriority Unsecured Claims		•	,				
Suite 300 Matteson, IL 60443  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.19 of (Check one):  Part 2: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.26 of (Check one):  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.26 of (Check one):  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.14 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims		Line 4.12 of (Check one):					
Name and Address NCO Financial Systems, Inc. Bankruptcy Department PO Box 15630 Wilmington, DE 19850  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.19 of (Check one): Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.26 of (Check one): Part 1: Creditors with Priority Unsecured Claims  Attn: Bankruptcy Dept. PO Box 7949 Overland Park, KS 66207-0949  Name and Address Vision Fin 1900 W Severs Rd La Porte, IN 46350	•		Part 2: Creditors with Nonpriority Unsecured Claims				
Name and Address NCO Financial Systems, Inc. Bankruptcy Department PO Box 15630 Willmington, DE 19850  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Sprint Corp.  Attn: Bankruptcy Dept. PO Box 7949  Overland Park, KS 66207-0949  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	Matteson, IL 60443						
NCO Financial Systems, Inc. Bankruptcy Department PO Box 15630 Wilmington, DE 19850  Last 4 digits of account number  Name and Address Sprint Corp. Attn: Bankruptcy Dept. PO Box 7949 Overland Park, KS 66207-0949  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number  Part 2: Creditors with Priority Unsecured Claims Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims		Last 4 digits of account number					
Bankruptcy Department PO Box 15630 Willmington, DE 19850  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor? Sprint Corp. Attn: Bankruptcy Dept. PO Box 7949 Overland Park, KS 66207-0949  Last 4 digits of account number  Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Vision Fin 1900 W Severs Rd La Porte, IN 46350		•	•				
Wilmington, DE 19850  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.26 of (Check one):  Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Vision Fin  1900 W Severs Rd  Last 4 digits of account number  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims		Line 4.19 of (Check one):	<u> </u>				
Name and Address Sprint Corp. Attn: Bankruptcy Dept. PO Box 7949 Overland Park, KS 66207-0949  Name and Address Vision Fin 1900 W Severs Rd Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.26 of (Check one): Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims			■ Part 2: Creditors with Nonpriority Unsecured Claims				
Name and Address  Sprint Corp. Attn: Bankruptcy Dept. PO Box 7949 Overland Park, KS 66207-0949  Last 4 digits of account number  Con which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.26 of (Check one): Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Vision Fin 1900 W Severs Rd La Porte, IN 46350  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.14 of (Check one): Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims							
Sprint Corp. Attn: Bankruptcy Dept. PO Box 7949 Overland Park, KS 66207-0949  Last 4 digits of account number  Conversion Fin 1900 W Severs Rd La Porte, IN 46350  Line 4.26 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims		Last 4 digits of account number					
Attn: Bankruptcy Dept. PO Box 7949 Overland Park, KS 66207-0949  Last 4 digits of account number  Name and Address Vision Fin 1900 W Severs Rd La Porte, IN 46350  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims	Name and Address	On which entry in Part 1 or Part :	2 did you list the original creditor?				
PO Box 7949 Overland Park, KS 66207-0949  Last 4 digits of account number  Name and Address Vision Fin 1900 W Severs Rd La Porte, IN 46350  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.14 of (Check one): Part 2: Creditors with Priority Unsecured Claims	•	Line <b>4.26</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims				
Overland Park, KS 66207-0949  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Vision Fin  1900 W Severs Rd  La Porte, IN 46350  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.14 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims			■ Part 2: Creditors with Nonpriority Unsecured Claims				
Last 4 digits of account number  Name and Address  On which entry in Part 1 or Part 2 did you list the original creditor?  Vision Fin  1900 W Severs Rd  La Porte, IN 46350  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.14 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims							
Vision Fin  1900 W Severs Rd La Porte, IN 46350  Line 4.14 of (Check one):  □ Part 1: Creditors with Priority Unsecured Claims  □ Part 2: Creditors with Nonpriority Unsecured Claims		Last 4 digits of account number					
1900 W Severs Rd La Porte, IN 46350  Part 2: Creditors with Nonpriority Unsecured Claims	Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?				
La Porte, IN 46350		Line 4.14 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
			Part 2: Creditors with Nonpriority Unsecured Claims				
	La : 0.10, iii 40000	Last 4 digits of account number					

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				7	Total Claim
	6f.	Student loans	6f.	\$	11,692.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	31,982.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	43,674.00

		DOCUME	eni Pade 31 orod	<u>)                                    </u>	
Fill in this infor	mation to identify your	case:			
Debtor 1	Keysa K. Henson	-Rhodes			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing

# Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the , Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3	Oity		Olaic	Zii Gode	
	Name				
					<u> </u>
	Number	Street			
	City		State	ZIP Code	<del>_</del>
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	-				
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

	Case 11-03024	Doc 1 Tilea 03/2 Docume		os/23/17 00.23.31	3/29/17 8:23AN
Fill in this	information to identify your				
Debtor 1	Keysa K. Hensor	n-Rhodes			
	First Name	Middle Name	Last Name		
Debtor 2		ACT III A			
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	ber				
(if known)					Check if this is an
					amended filing
Officia	l Form 106H				
	lule H: Your Cod	lahtars			40/4E
Scried	iule II. Toul Cou	ienioi 2			12/15
	and case number (if known you have any codebtors? (if	,		as a codebtor.	
■ No					
<b>—</b> 163	•				
	hin the last 8 years, have yo a, California, Idaho, Louisiana				tes and territories include
	Go to line 3.				
☐ Yes	s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form	2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed the cr	h you. List the person shown editor on Schedule D (Official edule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The credito Check all schedules tha	r to whom you owe the debt apply:
3.1				☐ Schedule D, line	
	Name			Schedule E/F, line	
				☐ Schedule G, line _	
-	N 1				
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line _	
-	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information to identify your ca	ise:		
De	btor 1 Keysa K. He	nson-Rhodes		
	btor 2 puse, if filing)			
Un	ited States Bankruptcy Court for the	NORTHERN DISTRIC	T OF ILLINOIS	
	se number nown)			Check if this is:  ☐ An amended filing ☐ A supplement showing postpetition chapter
0	fficial Form 106I			13 income as of the following date:  MM / DD/ YYYY
S	chedule I: Your Inco	ome		12/15
atta				tion about your spouse. If more space is needed, nd case number (if known). Answer every question
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Employment status*	■ Employed	☐ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	■ Not employed
	employers.	Occupation	DSP	non-filing spouse
	Include part-time, seasonal, or self-employed work.	Employer's name	CIF Illinois	
	Occupation may include student or homemaker, if it applies.	Employer's address	1902 Fox Dr. Suite B Champaign, IL 61822	
		How long employed th	nere? 1 year	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
 Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

			non-fili	ng spouse
2.	\$	2,455.00	\$	0.00
3.	+\$	0.00	+\$	0.00
4.	\$	2,455.00	\$	0.00

For Debtor 1 For Debtor 2 or

\*See Attachment for Additional Employment Information

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Debt	or 1	Keysa K. Henson-Rhodes	-	Case r	number (if known)			
					Debtor 1	non-	Debtor 2 or filing spouse	
	Copy	line 4 here	4.	\$	2,455.00	\$	0.00	_
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	251.00	\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	_
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	<del>-</del> -
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	_
	5e.	Insurance	5e.	\$	182.00	\$	0.00	_
	5f.	Domestic support obligations	5f.	\$ _	0.00	\$	0.00	_
	5g. 5h.	Union dues Other deductions. Specify: Sup Life/ Ad&d	5g. 5h.+	\$ 	33.00 31.00	- <sup>⊅</sup> —	0.00	_
_		<del>-</del>	_	· —	-	· : —		=
6. –		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	497.00	\$	0.00	-
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,958.00	\$	0.00	-
8.	List a	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	_
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	_
	8e.	Social Security	8e.	\$	539.00	\$	0.00	=
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	_
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	_
	8h.	Other monthly income. Specify: Part Time Job	8h.+	\$	300.00	+\$	0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	839.00	\$	0.00	0
10	Calc	ulate monthly income. Add line 7 + line 9.	10. \$		2,797.00 + \$		0.00 = \$	2,797.00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	ΙΟ.   Ψ-		- T - T - T - T - T - T - T - T - T - T		<u> </u>	2,131.00
11.	State Include other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not a	depend		•		chedule J.	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$	2,797.00
13.	Do y	ou expect an increase or decrease within the year after you file this form	?				Combir monthl	ned y income
		No.						

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Debtor 1 Keysa K. Henson-Rhodes Case number (if known)

## Official Form B 6I **Attachment for Additional Employment Information**

Debtor		
Occupation	Clerk	
Name of Employer	Rhode Florist	
How long employed		
Address of Employer	7442 Cottage Grove	
, ,	Chicago, IL 60619	

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	in this information to identify y otor 1  Keysa K. He		odes		Cł		f this is:	
	btor 2 bouse, if filing) ited States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS					As	supplement show	ving postpetition chapter the following date:
Unit						MN	// DD / YYYY	
	nown)							
0	fficial Form 106J							
S	chedule J: Your	Exper	nses					12/15
info nur	as complete and accurate as ormation. If more space is no mber (if known). Answer eve	eded, atta ry questio	ach another sheet to this					
Par 1.	t 1: Describe Your House Is this a joint case?	ehold						
	■ No. Go to line 2. □ Yes. <b>Does Debtor 2 live</b>	in a sanar	rate household?					
	□ No	·	ial Form 106J-2, <i>Expenses</i>	for Separate Househo	o <i>ld</i> of D	ebtor	2.	
2.	Do you have dependents? ☐ No							
	Do not list Debtor 1 and Debtor 2.	■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2			Dependent's age	Does dependent live with you?
	Do not state the							□ No
	dependents names.			Daughter			12	Yes
				Daughter			18	□ No ■
				Daugnter				■ Yes □ No
								☐ Yes
								□ No
								☐ Yes
3.	Do your expenses include expenses of people other to yourself and your dependent	:han ∟	No I Yes					
	t 2: Estimate Your Ongo							
exp	imate your expenses as of y penses as of a date after the plicable date.							
the	lude expenses paid for with value of such assistance ar ficial Form 106l.)	non-cash id have in	government assistance it cluded it on Schedule I: Y	f you know Your Income	1		Your exp	enses
4.	The rental or home owners payments and any rent for the			nclude first mortgage	4.	\$_		800.00
	If not included in line 4:							
	4a. Real estate taxes				4a.	\$		0.00
	4b. Property, homeowner'				4b.			0.00
	4c. Home maintenance, re	•			4c. 4d	. –		0.00

0.00

5. Additional mortgage payments for your residence, such as home equity loans

Debt	tor 1 <b>K</b>	eysa K. Henson-Rhodes	Case num	ber (if known)	
6.	Utilities:	:			
	6a. El	lectricity, heat, natural gas	6a.	\$	200.00
	6b. W	/ater, sewer, garbage collection	6b.	\$	0.00
	6c. Te	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	300.00
	6d. Ot	ther. Specify:	6d.	\$	0.00
7.	Food an	nd housekeeping supplies		\$	500.00
8.	Childca	re and children's education costs	8.	\$	0.00
9.	Clothing	g, laundry, and dry cleaning	9.	\$	50.00
10.	Persona	al care products and services	10.	\$	50.00
		l and dental expenses	11.	\$	100.00
12.	Transpo	ortation. Include gas, maintenance, bus or train fare.			422.22
	Do not in	nclude car payments.	12.	\$	400.00
13.	Entertai	inment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitab	ble contributions and religious donations	14.	\$	0.00
15.	Insuran				
		nclude insurance deducted from your pay or included in lines 4 or 20.	4.5	•	
		ife insurance	15a.		0.00
		ealth insurance	15b.	· -	0.00
		ehicle insurance	15c.	·	300.00
		ther insurance. Specify:	15d.	\$	0.00
16.		Do not include taxes deducted from your pay or included in lines 4 or 20.	40	Φ.	
4-7	Specify:		16.	\$	0.00
17.		nent or lease payments:	17a.	\$	404.00
		ar payments for Vehicle 1	17a. 17b.	·	
		ar payments for Vehicle 2		·	0.00
		ther. Specify:	17c.	·	0.00
10		ther. Specify:	17d.	\$	0.00
18.		syments of alimony, maintenance, and support that you did not report as ed from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.		ayments you make to support others who do not live with you.	_	\$	0.00
	Specify:		19.		0.00
20.		eal property expenses not included in lines 4 or 5 of this form or on Sche		our Income.	
		lortgages on other property	20a.		0.00
		eal estate taxes	20b.	\$	0.00
	20c. Pr	roperty, homeowner's, or renter's insurance	20c.	\$	0.00
		laintenance, repair, and upkeep expenses	20d.	\$	0.00
		omeowner's association or condominium dues	20e.	\$	0.00
21.	Other: S		21.	+\$	0.00
		· · -			0.00
22.		te your monthly expenses			
		d lines 4 through 21.		\$	3,104.00
	22b. Cop	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add	d line 22a and 22b. The result is your monthly expenses.		\$	3,104.00
22	Coloulot	to your monthly not income			
<u> 2</u> 3.		te your monthly net income. opy line 12 (your combined monthly income) from Schedule I.	23a.	¢	2 707 00
		opy your monthly expenses from line 22c above.	23a. 23b.		2,797.00
	23D. CC	opy your monthly expenses from line 220 above.	230.	-Ф	3,104.00
	230 81	ubtract your monthly expenses from your monthly income.			
		he result is your <i>monthly net income</i> .	23c.	\$	-307.00
	• • • • • • • • • • • • • • • • • • • •			L	
24.	For exam	<b>expect an increase or decrease in your expenses within the year after yo</b> nple, do you expect to finish paying for your car loan within the year or do you expect your ion to the terms of your mortgage?			or decrease because of a
	■ No.	Evnlain here:			
	$\square \vee \circ \circ$	Leveloin horo:			

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Fill in this info	rmation to identify your	case:			
Debtor 1	Keysa K. Henson				
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					Check if this is an
				a	mended filing
Official For	m 106Dec				
Declara	tion About a	ın Individual	Debtor's So	chedules	12/15
f two married n	eople are filing togethe	r, both are equally respo	nsible for supplying co	rrect information.	
	3.13.1	,			
				s. Making a false statement, conc	
	ey or property by fraud in 18 U.S.C. §§ 152, 1341, 1		cruptcy case can result	in fines up to \$250,000, or impris	onment for up to 20
rears, or botti.	10 0.3.0. 99 132, 1341, 1	519, and 5571.			
Sig	gn Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petiti	
				Declaration, and Signatu	ure (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules file	ed with this declaration and	
X /s/ Ke	ysa K. Henson-Rhode	es	X		
	K. Henson-Rhodes	<del></del>	Signature of	f Debtor 2	
Signati	ure of Debtor 1				
Date	March 29. 2017		Date		

Fil	I in this inform	nation to identify you	r case:			
	btor 1	Keysa K. Henso				
	DIOI 1	First Name	Middle Name	Last Name		
1 -	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (	OF ILLINOIS		
	se number _					
(If K	nown)				_	heck if this is an mended filing
_						
	fficial Fo		Affairs for Individ	duals Filing for R	ankruntev	A/14
					equally responsible for sup	4/16
info	rmation. If m		attach a separate sheet to		additional pages, write you	
	<u> </u>	,	arital Status and Where You	Lived Before		
1.	-	current marital statu				
	■ Married					
	☐ Not mar					
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you	ived in the last 3 years. Do no	ot include where you live now	<i>i</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
<b>3.</b> stat					ity property state or territory ico, Texas, Washington and W	
	■ No					
	☐ Yes. Ma	ke sure you fill out Sci	hedule H: Your Codebtors (O	fficial Form 106H).		
Pa	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r last calenda nuary 1 to De	r year: cember 31, 2016)	■ Wages, commissions, bonuses, tips	\$23,804.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Case number (if known) Document Debtor 1 Keysa K. Henson-Rhodes

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of incommendation Check all that a		Gross income (before deductions and exclusions)
		ndar year b Decembe	efore that: r 31, 2015 )	■ Wages, commissions, bonuses, tips	\$15,328.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a l	business	
		ndar year: Decembe	r 31, 2014 )	■ Wages, commissions, bonuses, tips	\$15,218.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business		☐ Operating a l	business	
W	vinnings. ist each ■ No	If you are f	iling a joint cas	pensions; rental income; interse and you have income that young from each source separa	you received together, list it o	nly once under De	ebtor 1.	a gambiing and lottery
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc. Describe below.		Gross income (before deductions and exclusions)
Part 3	3: Lis	t Certain P	avments You	Made Before You Filed for	,			
6. A	re eithe	er Debtor 1	s or Debtor 2	's debts primarily consume Debtor 2 has primarily consu	r debts?	o are defined in 11	11.5.0. 5.40:	1/0) on "incurred by on
_	i NO.			personal, family, or househol		s are defined in Tr	0.3.0. 9 10	r(o) as incurred by air
			-	ore you filed for bankruptcy, di	d you pay any creditor a tota	l of \$6,425* or mor	re?	
		□ <sub>No.</sub>	Go to line 7					
		☐ Yes	paid that cr not include	each creditor to whom you pai editor. Do not include paymer payments to an attorney for the	nts for domestic support oblights bankruptcy case.	ations, such as ch	ild support a	nd alimony. Also, do
		•	•	t on 4/01/19 and every 3 year		or after the date of	r adjustment.	
	■ Yes			or both have primarily consumer you filed for bankruptcy, di		l of \$600 or more?		
		■ No.	Go to line 7	<b>'</b>				
		□ Yes	include pay	each creditor to whom you pai rments for domestic support o this bankruptcy case.				
	Credito	r's Name ai	nd Address	Dates of navme	ent Total amount	Amount you	Was this r	navment for

still owe

paid

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7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.  No							
	☐ Yes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
8.	Within 1 year before you filed for bankruptor insider? Include payments on debts guaranteed or cos		ments or transfer a	ny property on a	ccount of a de	ebt that benefited an		
	No							
	☐ Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name		
Pa	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures						
9.	Within 1 year before you filed for bankruptor. List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency		Status of th	e case		
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below  ☐ No. Go to line 11.  ☐ Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	shed, attached	l, seized, or levied?		
	Creditor Name and Address	Describe the Property		Date		Value of the property		
		Explain what happened	i					
	Cnac/mi105	2004 Ford Taures		2015		\$0.00		
	3227 S Westnedge Ave Kalamazoo, MI 49008	■ D						
	Raiaiiia200, Wii 43000	<ul><li>■ Property was reposse</li><li>□ Property was foreclose</li></ul>						
		☐ Property was foreclos						
		☐ Property was attache						
		Property was attache	a, seized of levied.					
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No  Yes. Fill in the details.		luding a bank or fir	nancial institutior	ı, set off any a	mounts from your		
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount		
12.	Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a  ■ No □ Yes		erty in the possessi	ion of an assigne	e for the bene	efit of creditors, a		

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Debtor 1 Keysa K. Henson-Rhodes

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Case number (if known)

Par	t 5: List Certain Gifts and Contributions	;							
13.	Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift.	ptcy,	did you give any gifts with a total value of more t	han \$600 per person <sup>°</sup>	?				
	Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift and Address:	)	Describe the gifts	Dates you gave the gifts	Value				
14.	Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift or co		did you give any gifts or contributions with a totation.	al value of more than	\$600 to any charity?				
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	otal	Describe what you contributed	Dates you contributed	Value				
Par	t 6: List Certain Losses								
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?  No Yes. Fill in the details.								
	how the loss occurred	Includ	ribe any insurance coverage for the loss the the amount that insurance has paid. List pending since claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost				
Par	t 7: List Certain Payments or Transfers								
16.	consulted about seeking bankruptcy or p	repari	lid you or anyone else acting on your behalf pay oing a bankruptcy petition? rs, or credit counseling agencies for services require		rty to anyone you				
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
	David M. Siegel & Associates 790 Chaddick Drive Wheeling, IL 60090		Attorney Fees	10/21/16 - 2/6/17	\$1,115.00				
17.	Within 1 year before you filed for bankrup promised to help you deal with your credi Do not include any payment or transfer that y	itors o		or transfer any prope	rty to anyone who				
	■ No □ Yes. Fill in the details.								
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment				

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Debtor 1 Keysa K. Henson-Rhodes

Description: Description

	Within 2 years before you filed for bankrupt transferred in the ordinary course of your b Include both outright transfers and transfers mainclude gifts and transfers that you have alread No  Yes. Fill in the details.	usiness or financial affa ade as security (such as	airs? the granting of a	-		
	Person Who Received Transfer Address Person's relationship to you	Description and very property transfer		paym	ribe any property or ents received or debts n exchange	Date transfer was made
	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.		ny property to a	self-settle	ed trust or similar device	of which you are a
	Name of trust	Description and v	alue of the prop	perty trans	sferred	Date Transfer was
						made
Part	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and Sto	orage Uni	ts	
<ul> <li>Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in you sold, moved, or transferred?     Include checking, savings, money market, or other financial accounts; certificates of deposit; shares houses, pension funds, cooperatives, associations, and other financial institutions.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Chase Bank	xxxx-	■ Checking □ Savings □ Money Marl □ Brokerage □ Other	ket	3/16	\$0.00
	Do you now have, or did you have within 1 y cash, or other valuables?  No Yes. Fill in the details.	year before you filed for	r bankruptcy, an	ny safe de	posit box or other depos	itory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit of	or place other than you	r home within 1	year befo	re you filed for bankrupt	cy?
	No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or l to it? Address (Number, S		Describe	the contents	Do you still have it?

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Debtor 1 Keysa K. Henson-Rhodes

Par	t 9: Identify Property You Hold or Control for S	Someone Else							
23.	Do you hold or control any property that someone for someone.	ne else owns? Include any proper	rty yo	ou borrowed from, are storing for	, or hold in trust				
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	scribe the property	Value				
Par	t 10: Give Details About Environmental Informa	tion							
For	the purpose of Part 10, the following definitions a	apply:							
	Environmental law means any federal, state, or I toxic substances, wastes, or material into the ai regulations controlling the cleanup of these sub	r, land, soil, surface water, ground	_	•					
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	-	law,	whether you now own, operate,	or utilize it or used				
	Hazardous material means anything an environr hazardous material, pollutant, contaminant, or s	nental law defines as a hazardous	s was	ste, hazardous substance, toxic s	substance,				
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of wher	n the	ey occurred.					
24.	Has any governmental unit notified you that you	may be liable or potentially liable	and und	ler or in violation of an environme	ental law?				
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any release of hazardous material?								
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adminis	trative proceeding under any envi	ironr	mental law? Include settlements a	and orders.				
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case				
Par	t 11: Give Details About Your Business or Conr	nections to Any Business							
27.	Within 4 years before you filed for bankruptcy, d	lid you own a business or have ar	ny of	the following connections to any	business?				
	☐ A sole proprietor or self-employed in a to	rade, profession, or other activity,	, eith	er full-time or part-time					
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	☐ A partner in a partnership								
	☐ An officer, director, or managing executi	ve of a corporation							
	☐ An owner of at least 5% of the voting or	equity securities of a corporation							

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			Document	Page 45 of 60		3
Debtor 1	Keysa K. Henson-Rhoo	des		Case number (if known)		

	No. None of the above applies. Go to F	Part 12.						
	Yes. Check all that apply above and fill in the details below for each business.							
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.					
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed					
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	cy, did you give a financial statement to an	yone about your business? Include all financial					
	■ No							
	☐ Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued						
Par	t 12: Sign Below							
are t		false statement, concealing property, or ok	leclare under penalty of perjury that the answers otaining money or property by fraud in connection rs, or both.					
/s/	Keysa K. Henson-Rhodes							
Ke	ysa K. Henson-Rhodes nature of Debtor 1	Signature of Debtor 2						
Dat	e March 29, 2017	Date						
Did	you attach additional pages to Your Stateme	ent of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?					
	lo							
ΠY	es							
_	you pay or agree to pay someone who is not	an attorney to help you fill out bankruptcy	forms?					
	lo							

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Document

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Fill in this infor	mation to identify your case:		
Debtor 1	Keysa K. Henson-Rhodes		
	First Name Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name Middle Name	Last Name	
United States Ba	ankruptcy Court for the: NORTHERN DIS	STRICT OF ILLINOIS	
Case number (if known)			☐ Check if this is an
			amended filing
Official Fo	orm 108		
Stateme	nt of Intention for Indi	viduals Filing Under Chapte	r 7 12/15
If you are an ind	lividual filing under chapter 7, you must t	fill out this form if:	
	e claims secured by your property, or	in out this form in	
	sed personal property and the lease has		
		er you file your bankruptcy petition or by the date set the time for cause. You must also send copies to the	
on the	form	·	·
	eople are filing together in a joint case, b	ooth are equally responsible for supplying correct in	formation. Both debtors must
· ·			
	and accurate as possible. If more space our name and case number (if known).	is needed, attach a separate sheet to this form. On t	he top of any additional pages,
Part 1: List Y	our Creditors Who Have Secured Claims		
			(Official Form 106D) fill in the
information b	elow.	D: Creditors Who Have Claims Secured by Property	·
Identify the cr	reditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	Bridgecrest Crest Company, LLC	☐ Surrender the property.	□No
name:		Retain the property and redeem it.	_
Description of	2013 Jeep Patriot	Retain the property and enter into a	Yes
property	Bridgecrest	Reaffirmation Agreement.  Retain the property and [explain]:	
securing debt	Secured Lien \$5000		_
Creditor's <b>1</b> name:	FitleMax of Illinois, Inc.	☐ Surrender the property.	□ No
name.		<ul><li>☐ Retain the property and redeem it.</li><li>■ Retain the property and enter into a</li></ul>	■ Yes
Description of	f 2010 Chrysler Seabring	Reaffirmation Agreement.	
property securing debt		☐ Retain the property and [explain]:	
scouring debt	•		_
Part 2: List Y	our Unexpired Personal Property Leases		

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

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Debtor 1 Keysa K. Henson-Rhodes	Case number (if known)
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention abour property that is subject to an unexpired lease.	t any property of my estate that secures a debt and any personal
X /s/ Keysa K. Henson-Rhodes X	
Keysa K. Henson-Rhodes Signature of Debtor 1	Signature of Debtor 2
Date March 29, 2017 Date	te

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-09824 Doc 1 Filed 03/29/17 Entered 03/29/17 08:25:51 Desc Main Document Page 52 of 60

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Northern District of Illinois

In re	Keysa K. Henson	-Rhodes		Case No.	
			Debtor(s)	Chapter	7
	DISCI	OSURE OF COMI	PENSATION OF ATTO	RNEY FOR D	EBTOR(S)
co	ompensation paid to me	within one year before the	016(b), I certify that I am the attorn filing of the petition in bankruptcy ion of or in connection with the bar	, or agreed to be paid	to me, for services rendered or to
					1,115.00
	Prior to the filing of	this statement I have receive	ved	<u> </u>	1,115.00
	Balance Due			\$	0.00
2. T	he source of the compe	nsation paid to me was:			
	■ Debtor □	Other (specify):			
3. T	he source of compensat	ion to be paid to me is:			
	■ Debtor □	Other (specify):			
4. <b>•</b>	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm				abers and associates of my law firm.
			pensation with a person or persons we names of the people sharing in the		
5. Iı	n return for the above-d	isclosed fee, I have agreed t	to render legal service for all aspect	ts of the bankruptcy	case, including:
<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reduce to market value; exemption planning; filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.</li> </ul>					
6. B	Representation		d fee does not include the following dischargeability actions, judiceding.		es (except in Chapter 13
			CERTIFICATION		
	certify that the foregoin nkruptcy proceeding.	g is a complete statement of	f any agreement or arrangement for	r payment to me for	representation of the debtor(s) in
Ма	arch 29, 2017		/s/ David M. Sieg	el	
Da	•		David M. Siegel Signature of Attorne David M. Siegel 8 790 Chaddick Dr	ey & Associates ive	

(847) 520-8100 Name of law firm

#### **Chapter 7 Bankruptcy Retainer Agreement**

This agreement acknowledges that the undersigned individual(s) [Client(s)] hereby retains and employs the Law Firm of DAVID M. SIEGEL & ASSOCIATES [Attorney] for representation in a Chapter 7 bankruptcy case. In consideration for services rendered and to be rendered, the Client agrees to pay Attorney as follows:

- a) A FLAT FEE as specified in paragraph H will be required to file a bankruptcy petition for the Client and for representation of the Client through discharge. The fee includes all required court costs and filing fees, as well as compensation for Attorney's time and labor. The fee is immediate compensation for the firm's commitment to perform future services; the fee is property of the firm and may be deposited in the firm's operating or business account.
- b) Representation shall begin upon execution of this agreement and tender of the initial payment, and will continue until the end of the case. The fee includes the preparation, review, and revision of the bankruptcy petition, communications with the Client, representation and appearance at the §341 Meeting of Creditors and §2004 examinations as necessary, communication with the bankruptcy and United States trustees, communication with creditors, review and completion of reaffirmation agreements, and court appearances.
- c) The fee **does not** include representation in any adversarial proceedings. The Client and Attorney may enter in to an additional agreement to provide for representation in an adversarial proceeding. In the event that the case is converted to another Chapter, there may be an additional fee.
- d) Additional Fees:
  - A fee of \$250.00 shall be added in the event that Client misses the scheduled §341 Meeting of Creditors.
  - A fee of \$100.00 shall be added to amend Schedules D, E, and F to include creditors who were not originally provided by the Client. The Client has the full responsibility to ensure that all creditors are listed.
  - A fee of \$25.00 shall be added for any non-sufficient/returned checks. Post-dated checks are not accepted and will be voided upon receipt.
  - A fee of \$820.00 shall be added to reopen a case and file the second credit counseling certificate if the Client fails to take the second credit counseling course and provide Attorney with the certificate in a timely fashion.
- e) The Client will be billed on any outstanding balance at the rate of \$100.00 every two weeks. Clients who fail to make payments as required will be assessed late fees in the amount of \$25.00 per billing period plus interest at the rate of 18% per year on any unpaid balance.
- f) No case shall be filed until all fees are paid in full.
- g) In the event that a Client pays the flat fee in full, and later elects to not proceed with the case, the Client is entitled to a refund of the court costs and filing fees only.

### Important Bankruptcy Information

#### **Debts that are Discharged**

The Chapter 7 discharge order eliminates a Client's legal obligation to pay a debt that is discharged. Most, but not all, types of debts are discharged if the debt existed on the date the bankruptcy case was filed. (If this case was begun under a different Chapter of the Bankruptcy Code and converted to a Chapter 7, the discharge applies to debts owed when the bankruptcy case was converted.)

### **Debts that are Not Discharged**

Some of the common types of debts which are not discharged in a Chapter 7 bankruptcy case are:

- a) Debts for most taxes;
- b) Debts that are in the nature of alimony, maintenance, or support;
- c) Debts for student loans;

H.

- d) Debts for most fines, penalties, forfeitures, or criminal restitution obligations;
- e) Debts for personal injuries or death caused by the Client's operation of a motor vehicle while intoxicated;
- f) Some debts that are not properly listed by the Client;
- g) Debts that the bankruptcy court specifically determines to be non-dischargeable;

The FLAT FEE for representation in this matter will be \$

h) Debts for which the Client has given up the discharge protection by signing reaffirmation agreements in compliance with the Bankruptcy Code requirements for reaffirming debts.

	acknowledge that he or she unity to ask questions regar				
Date:	10/10/100		Signed: Deus	a Hen Ple	
				enson-RAC	
			Time Josephin		
Date:			Signed:		
. ,			Print:		
			10		
Date:	10/10/16	Signed: Attorn	ney for David M. Siegel		

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# United States Bankruptcy Court Northern District of Illinois

In re	Keysa K. Henson-Rhodes		Case No.		
	•	Debtor(s)	Chapter 7		
	VER	RIFICATION OF CREDITOR MA	ATRIX		
	Number of Creditors: 42				
	The above-named Debtor(s) h (our) knowledge.	hereby verifies that the list of credito	rs is true and cor	rrect to the best of my	
Date:	March 29, 2017	/s/ Keysa K. Henson-Rhodes Keysa K. Henson-Rhodes Signature of Debtor			

Aarons Sales & Leasing 4428 W. North Ave Chicago, IL 60639

Ad Astra Recovery Serv 7330 W 33rd St N Ste 118 Wichita, KS 67205

AFNI PO Box 3667 Bloomington, IL 61702

ARMCO LLC dba Aaron's Sales & Leasing 4062 Northpoint Blvd. Waukegan, IL 60085

Arnold Scott Harris 111 W. Jackson, #600 Chicago, IL 60604

Bridgecrest Crest Company, LLC 7300 E Hampton Ave Mesa, AZ 85209

Bud's Ambulance Services P.O. Box 659 Dolton, IL 60419

Cnac/mi105 3227 S Westnedge Ave Kalamazoo, MI 49008

Commonwealth Edison Bankruptcy Department 2100 Swift Drive Oak Brook, IL 60523-1559

Commonwealth Edison
Bankruptcy Department
3 Lincoln Center
Oak Brook Terrace, IL 60181-4204

Commonwealth Edison PO Box 6111 Carol Stream, IL 60197-6111

Contract Callers Inc. 501 Greene Street 3rd Floor Suite 302 Augusta, GA 30901

Convergent Outsourcing 800 Sw 39th St Renton, WA 98057

Dependon Collection Service Attn: Bankruptcy PO Box 4983 Oak Brook, IL 60522-4833

Emer Care Phys Serv - Blue Island Attn: Bankruptcy 12935 Gregory Street Blue Island, IL 60406

First Premier Bank Bankruptcy Department PO Box 5523 Sioux Falls, SD 57117

First Premier Bank 3820 N. Louise Ave. Sioux Falls, SD 57107

Illinois Collection Se 8231 185th St Ste 100 Tinley Park, IL 60487

Illinois Tollway Attn:Attorney General Legal Dept. 2700 Ogden Ave. Downers Grove, IL 60515

Ingallis Memorial Hospital Correspondence Address PO Box 3397 Chicago, IL 60654-0397 Ingalls Memorial Hospital Bankruptcy Department PO Box 75608 Chicago, IL 60675

MCSI P.O. Box 327 Palos Heights, IL 60463

Medicalrecov 2250 E Devon Des Plaines, IL 60018

Metrosouth Medical Center Patient Financial Services Dept. 12935 S. Gregory Street Blue Island, IL 60406

Municollofam 3348 Ridge Road Lansing, IL 60438-3112

Nationwide Credit & Collection 815 Commerce Drive Suite 270 Oak Brook, IL 60523-8852

NCO Financial Systems 507 Pudential Road Horsham, PA 19044

NCO Financial Systems, Inc. 600 Holiday Plaza Drive Suite 300 Matteson, IL 60443

NCO Financial Systems, Inc. Bankruptcy Department PO Box 15630 Wilmington, DE 19850

Nicor Gas ALL MAIL GOES TO Bankruptcy Dept. PO Box 190 Aurora, IL 60507-0190 Payday Loan 1551 Plainfield Joliet, IL 60435

PLS 9920 South Western Ave. Chicago, IL 60680

Residential Credit Solutions 4282 N. Freeway Fort Worth, TX 76137

Sage Telecom
P.O. Box 79051
Phoenix, AZ 85062-9051

Speedy Cash Bankruptcy Department PO Box 780408 Wichita, KS 67278-0408

Sprint PO Box 4191 Carol Stream, IL 60197-4191

Sprint Corp.
Attn: Bankruptcy Dept.
PO Box 7949
Overland Park, KS 66207-0949

Thorton Township High School 15001 Broadway Ave Harvey, IL 60426

TitleMax of Illinois, Inc. 14450 S. LaGrange Road Orland Park, IL 60462

Us Dept Of Ed/glelsi Po Box 7860 Madison, WI 53707

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Village Of S Chicago Heights R Attn: Bankruptcy Department 3317 Chicago Road South Chicago Heights, IL 60411

Vision Fin 1900 W Severs Rd La Porte, IN 46350